

Best Available Copy

CLAIMS ONLY						SERIAL NO.	FILING DATE		
						APPLICANT(S)			
CLAIMS									
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		*	*	*
	IND.	DEP.	IND.	DEP.	IND.	DEP.			
1	/		/			51			
2	/					52			
3	/					53			
4	/					54			
5	/					55			
6	/					56			
7	/	/				57			
8	/					58			
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18	/					68			
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22	/	/				72			
23	/	/				73			
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41						91			
42						92			
43						93			
44						94			
45						95			
46						96			
47						97			
48						98			
49						99			
50						100			
TOTAL IND.	/					TOTAL IND.			
TOTAL DEP.	/					TOTAL DEP.			
TOTAL CLAIMS	/					TOTAL CLAIMS			

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS